MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO 275)

SERIAL NO.

SERIAL NO.

APPLICANT(S)

FILING DATE

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170 - 1360 (REV. 11/04)

SERIAL NO.) MULTIPLE DEPENDENT CLAIM FILING DATE FEE CALCULATION SHEET APPLICANT(S) (FOR USE WITH FORM PTO-875) **CLAIMS** AFTER AFTER AS FILED AFTER AFTER AS FILED. I*AMERDMENT 1 MAMENDMENT 1 AMENDMENT 1 MAMENDMENT IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. 23 76 28 29 30 31 T TOTAL IND. TOTAL IND total deĥ (a TOTAL DEP TOTAL TOTAL CLAIMS CLAIMS